



# Indiana State Department of Health

## Pertussis Treatment and Chemoprophylaxis Recommendations

Antibiotic	Daily Dosage	
	Children*	Adults**
Erythromycin (E-mycin®, Eryc®, EryTab®)	40-50 mg/kg/day PO, in 4 divided doses (Max 2 g/day) for 14 days	250-500 mg PO, QID (Max 2 g/day) for 14 days
<b>Alternatives for patients/contacts who cannot tolerate erythromycin.</b>		
Trimethoprim-Sulfamethoxazole <sup>TM</sup> (Bactrim <sup>TM</sup> , Septra®)	8 mg TMP/40 mg SMX/kg/day PO in 2 divided doses for 14 days	1 double strength tab, BID for 14 days
Azithromycin (Zithromax®)	10-12 mg/kg/day PO, as 1 dose (Max 500 mg/day) for 5 days ***	500 mg PO, in 1 dose (Max 500 mg/day) for 5 days
Clarithromycin (Biaxin®)	15-20 mg/kg/day PO in 2 divided doses (Max 1 g/day for 7 days) for 7 days	500 mg PO, BID (Max 1 g/day for 7 days) for 7 days

**SMX** = sulfamethoxazole, should not be given to pregnant women near term, nursing mothers, or infants < 2 months of age

**TMP** = trimethoprim, should not be given to pregnant women near term, nursing mothers, or infants < 2 months of age

\* Based on: American Academy of Pediatrics. Pertussis. In: Pickering LK, ed. *Red Book: 2003 Report of Committee on Infectious Disease*. 26<sup>th</sup> ed. Elk Grove Village, IL: American Academy of Pediatrics; 2003: 474-475.

\*\* Per package insert and conversation with CDC; for Azithromycin, **Z-pak** is an alternative.

\*\*\* Per conversation with CDC, the following treatment regimen using Azithromycin for children may be considered: Azithromycin 10 mg/kg (Max 500 mg/day) by mouth on the first day of treatment and 5 mg/kg (MAX 250 mg/day) once daily on the second to fifth days of treatment.

(Langley, JM, et al. Azithromycin Is as Effective as and Better Tolerated Than Erythromycin Estolate for the Treatment of Pertussis. PEDIATRICS, (114 No. 1), July 2004: e96-e101.

Adapted from the North Dakota Department of Health